## TENNESSEE STATE BOARD OF EQUALIZATION APPLICATION FOR PROPERTY TAX EXEMPTION

This form must be <u>COMPLETELY FILLED IN AND SIGNED</u> and must include the following attachments: (1) Quitclaim or warranty deed for real property; (2) Corporate Charter & Bylaws or if unincorporated, a copy of any other document that explains the organization's governing structure; (3) Financial information for the last fiscal year (i.e., Form 990 if required by IRS, or income/expense statement/budget); (4) Photograph of property; (5) Personal property schedule/list for personal property only applications. Send a duplicate copy of the application and supporting documents to the county assessor.

This information is also available at our website <a href="http://www.comptroller.tn.gov/SBOE/">http://www.comptroller.tn.gov/SBOE/</a>

RETURN ALL REQUIRED DOCUMENTS AND REQUIRED FEE (Check or Money Order)

TO: STATE BOARD OF EQUALIZATION 9<sup>th</sup> Floor, W.R. Snodgrass TN Tower 312 Rosa L. Parks Avenue Nashville, TN 37243-1102 PHONE (615) 401-7883

Property Location: \_\_\_\_\_County

DO NOT WRITE IN THIS SPACE
RECORD #
FEE:

FOR OFFICIAL USE ONLY

PROPERTY TYPE: ( ) REAL PROPERTY			( ) PERSONAL PROPE	ERTY		
		PROP	ERTY ASSESSOR'S IDENT	TIFICATION		
	Control			Property	Special	
	Мар	Group	Parcel	Identifier	Interest	Acres

Personal Property Identification Number (if applicable):									
1.	Applicant's name:								
2.	Applicant's address:	Street Addres	ss						
	City	State	Zip Code	Telephone Number					
3.	Location of subject property:	Street Addres	es .						
	City	State	Zip Code						
4. /	Applicant's contact information:	Name							
	Telephone Number		E	E-mail Address					
		Street Addres	SS						
	City	State	Zip Code						
5.	Type of organization: ( ) Religious; (	) Charitable; ( ) Scie	entific; ( ) Educational; ( ) C	ther - Please Explain					
6.	Is the organization incorporated? (	) Yes ( ) No							
7.	. Type of exemption applied for: ( ) Religious; ( ) Charitable; ( ) Scientific; ( ) Educational								
8.	Has the organization previously made application for exemption for this or any other property? ( ) Yes ( ) No								
9.	If religious, was this property exempt under previous owner? ( ) Yes ( ) No								
10.	If religious, does this property replace previously approved exemption property owned by your organization?     ( ) Yes ( ) No								

11.	When did your organization receive the property'	?				
12.	What was the purchase price of the property?					
13.	What is the appraised value of the land?					
14.	. What is the appraised value of structures?					
15.	What is the value of the personal property?					
16.	If under construction, what is the estimated value	e of the completed building?				
17.	For real property, describe all structures located	on the parcel:				
18.	List all current uses/activities and state how ofter	n each use/activity occurs):				
19.	Date use began:					
20.	Is any portion of this property used by or leased to lease answer the following questions:	to another person or entity? ( ) Yes ( ) No				
	<ul><li>a. Who uses the property and how is it used?</li><li>b. When did use begin?</li></ul>					
	c. Is there a rental/usage fee charged by the ap If so, how is the amount calculated?	oplicant? ( ) Yes ( ) No				
		person/entity?				
04						
21.	The undersigned submits the following information	cion in support of this application (attach additional pages as necessary):				
ΔFI	FIDAVIT: I do hereby verify that the foregoing	statements are true and correct to the best of my knowledge and belief.				
A	Tibavii. Tuo nereby verify that the folegoing	statements are true and correct to the best of my knowledge and belief.				
	Doto	Cignoture				
	Date	Signature				
		R OFFICIAL USE ONLY				
` ′	APPROVED:					
` '	DENIED: PARTIAL:					
( )	FARTIAL.					
	EFFECTIVE DATE OF EXEMPTION :					
СО	MMENTS:					
		By				
		Staff Attorney or State Board Designee				